

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)  
Sills Federal PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NJ Republican State Committee 28 West State Street, Suite 305 Trenton, NJ 08608	Contribution Com. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/12/00	\$5,000.00
B. Full Name, Mailing Address and ZIP Code Franks for U.S. Senate 930 Styvesant Avenue Union, NJ 07082	Robert D. Franks Senate - NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/00	\$2,500.00
C. Full Name, Mailing Address and ZIP Code Franks for U.S. Senate 930 Styvesant Avenue Union, NJ 07082	Robert D. Franks Senate - NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/21/00	\$2,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Jim Saxton P.O. Box 795 Mount Holly, NJ 08060	Jim Saxton, House Candidate (NJ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
E. Full Name, Mailing Address and ZIP Code Lazio 2000 P.O. Box 921 New York, NY 10164-3692	Rick Lazio Senate - NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Zimmer 2000 845 Third Avenue NY, NY 10022	Dick Zimmer, House Candidate (NJ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... \$11,500.00

TOTAL This Period (last page this line number only) ..... \$11,500.00